

INFORMATION BULLETIN

WORKFORCE INVESTMENT ACT

Date: December 26, 2002 Expiration Date: 6/30/03

Number: WIAB02-49

69:53:vf:6527

TO: WORKFORCE DEVELOPMENT COMMUNITY

SUBJECT: REVISED WORKFORCE INVESTMENT ACT EXIT FORM

This information bulletin revises blocks 09 and 10 of the Workforce Investment Act (WIA) exit form released under WIA Information Bulletin <u>WIAB02-40</u>.

The form revision follows the Job Training Automation (JTA) system version 4.23 release dated October 25, 2002. Please refer to WIA Information Bulletin <u>WIAB02-34</u>, Log #5581, for details of the specific JTA changes.

Please ensure this information is shared with staff responsible for your local WIA Management Information System. If you have questions regarding this form change please contact Debor Untal, Performance Management Unit, at (916) 654-8295. Question concerning the JTA system release should be addressed to the JTA Help Desk at (916) 653-0202.

/S/ BOB HERMSMIEIER
Acting Chief
Workforce Investment Division

Attachment



WORKFORCE INVESTMENT ACT EXIT

Subgrantee Name	
_	
01 Application Number	
01 Application Number	
02 Agency Code	
Social Security Number	
30CIAL SECULITY INTITIDEL	

Last Name			First Name				Middle		
03 Exit Code	Exit Codes (Select up to the O1 Entered Employment O2 Called Back/Remained V O3 Entered Advanced Train O4 Entered Postsecondary O5 Attained Recognized Certificate/Diploma/Degr		06 Planned Services Completed With Layoff Employer 07 Planned Services Not Completer ing 08 Lacks Transportation Education 09 Family Care 10 Health/Medical		d 13 14 15 16	Death Institutionalized Voluntary Other Objective Assessment Only Returned to Secondary Education (Youth Only) Soft Exit Reservists Recalled			
04 Exit Date	04 Exit Date 05 Soft Exit Determination Date		06 Degree Attained 1 Yes 2 No, credential intended 3 No, credential not intended 4 No, credential pending 5 No training services provided		ed	 Type of Degree Attained High School Diploma Equivalency/GED AA or AS Diploma/Degree BA or BS Diploma or Degree Occupational Skills License Occupational Skills Certificate or Credential Other 			
1 Yes 2 No 2 No 2 Entered Postsecondary Education 1 Yes 2 No		1 Yes	dvanced Training 11 Entered Military Service 1 Yes 2 No			12 Entered Qualified Apprenticeship 1 Yes 2 No			
13 Date Employed	13 Date Employed 14 Employer Number 15 Employer Name								
Employer Address		Employer City/State		Employer ZIP					
16 Employer Contact		17 Contact Phone 18 Job Code/Job		18 Job Code/Job Titl	tle		19 Hours Per Week		
	21 Training Related Employment 1 Yes 2 No		22 Determination Method 1 Training to job 2 Industry to training 3 Other		23 Health Benefits 1 Yes 2 No		24 Non-Traditiona 1 Yes 2 No	al Employment	
Exit Staff Signature		25 Exit Staff ID		Date					
Post Exit Services									
26 Service Code 27 Description				28 Begin Date		29 End Date			
Post Program Service Code 01 Educational Achievement 02 Employment Services 03 Additional Youth Support 04 Citizen and Leadership 05 Follow-up Services									